Title of Intervention: A Mailed Intervention to Improve Attitudes toward Colorectal Cancer Screening among Older Adults

Intervention Strategies: Campaigns and Promotions

Purpose of the Intervention: To address perceived barriers to screening, increase positive expectations and improve screening rates among older adult populations

Population: Older adult patients aged 55 to 64

Setting: Health care facilities in the United Kingdom; health care facility-based, home-based

Partners: University, hospital

Intervention Description:

Campaigns and Promotions: The intervention group received a booklet prior to an invitation for a
colorectal cancer screening. The booklet followed a format of questions and answers about barriers to
colorectal cancer screening. The information was presented in the form of brief conversations between
friends and family members in a cartoon-strip fashion. Short sentences and simple words were used.
Each conversation tackled a particular barrier to screening, with summary paragraphs to emphasize the
important points. The cartoon-style drawings were intended to be humorous to make the topic seem
more approachable. Quotations from community members were included.

Theory: Health Belief Model, Theory of Planned Behavior, regret theories

Resources Required:

- Staff/Volunteers: Staff to coordinate distribution of booklets, graphic designer
- · Training: Not mentioned
- Technology: Printer, computer, design software
- Space: Not mentioned
- Budget: Not mentioned
- Intervention: Intervention booklet, envelopes and postage
- Evaluation: Postal questionnaires, psychosocial questionnaires, envelopes and postage

Evaluation:

- Design: Randomized controlled trial
- Methods and Measures:
 - Participants completed a questionnaire to measure whether or not the intervention reduced their perceived barriers.
 - Screening attendance rates were compared between groups to assess the efficacy of the intervention in increasing attendance.

Outcomes:

- Short Term Impact: The intervention was successful in reducing perceived barriers to screening.
- Long Term Impact: Screening rates were significantly higher in the intervention group than the control group.

Maintenance: Not mentioned

Lessons Learned: Future health education research should address the issue of how to make preventive behaviors equally accessible and acceptable to all sectors of the community.

Citation(s):

Wardle J, Williamson S, McCaffery K, et al. Increasing attendance at colorectal cancer screening: testing the efficacy of a mailed, psychoeducational intervention in a community sample of older adults. Health Psychol. Jan 2003;22(1):99-105.